

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 Phone : (407)425-7010 Fax Number : (407)425-2747

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

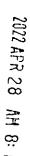
Email Address: RegisteredAgent@zksraservices.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LAKELAND PROPERTY, LLC

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COVER LETTER

TO:	Registration Sec Division of Corp		-	
		roperty, LLC		
SUBJE	CT:	Name of Limite	ed Liability Company	
			-	
The end	closed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please	return all correspo	ndence concerning this matter to	the following:	
		WILLIAM H. ROBBINSO	N, JR., ESQ.	
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		ZIMMERMAN, KISER &	SUTCLIFFE, P.A.	
		***************************************	Firm/Company	· · · · · · · · · · · · · · · · · · ·
315 E. ROBINSON STREET, STE 600				
			Address	
		ORLANDO, FLORIDA 32	801	
			City/State and Zip Code	
		REGISTEREDAGENT@ZI	KSRASERVICES.COM to be used for future annual report notifi	ngtian
				cacamy
For fu	ther information of	concerning this matter, please ca	ill:	
WILLIAM H. ROBBINSON, JR., ESQ. Name of Person		407 425-7010		
		at (Telephone Number	
Enclos	sed is a check for t	the following amount:		
₩ \$2	25.00 Filing Fee	☐ \$30.00 Filing Fec & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Scittion Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAKELAND PROPERTY, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number	were filed on February 6, 2018	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he-e:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1708 Altavista Circle			
(Principal office address MUST BE A STREET ADDRESS)	Lakeland, FL 33810			
Enter new mailing address, if applicable:	† 1708 Altavista Circle			
(Mailing address MAY BE A POST OFFICE BOX)	Lakeland, FL 33810			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		the name of the n		
New Registered Office Address:		7 F		
	Enter Flor-Lu street address , Florida _	AH 8		
New Registered Agent's Signature, if changing Registered Agent:	City:	·Zip Code·		
I hereby accent the appointment as registered agent and age	ee to act in this canacity. I further as	ree to comply with		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M AMBR = A	lanager uthorized Member	,	
<u>Title</u>	<u>Name</u>	Address	Type of Action
···········			Add
			☐ Remove
			☐ Change
			Remove
			□ Add
			☐ Remove
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ective date, if other than	must be specific and cannot s block does not meet the	e applicable stat	f filing or more than tutory filing requir	(optional) 90 days after filing.) Pur- ements, this date will	suant to 605,020 not be listed a
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record specifies a delar the 90th day after the 10 th the 10 th 10	yed effective date, l	but not an ef	fective time, a	t 12:01 a.m. on t	he earlier o
te: If the date inserted in thi cument's effective date on the record specifies a delathe The 90th day after the the second specifies.	yed effective date, leecord is filed.				he earlier c
te: If the date inserted in thi cument's effective date on the record specifies a delathe The 90th day after the the second specifies.	yed effective date, l				he earlier o

Page 3 of 3

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